Docket No: AM 101193

Patent



Mail Stop Patent Application Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450

NEW APPLICATION FOR TRANSMITTAL

Transmitted herewith for filing is the patent application of the following Inventor(s): Chengjin M. HUANG;

For: MONOCLONAL ANTIBODY SPECIFIC FOR AN EPITOPE OF INACTIVATED FELINE IMMUNODEFICIENCY-ENCODED GLYCOPROTEIN.

1.	Papers	s enclosed which are required for a filing date under 35 CFR 1.53(b):				
	\boxtimes	Pages of specification – 10 pages				
		Sequence Listing – pages on:				
		CD Rom or CD-R (2 copies); or				
		paper				
	\boxtimes	Pages of claims – 3 pages				
	\boxtimes	Page(s) of abstract – 1 pages				
	\boxtimes	Sheets of drawing – 1 pages				
	_					
		☐ Informal				
2.	Additional papers enclosed					
	\boxtimes	Information Disclosure Statement				
	\boxtimes	Form PTO-1449				
	\boxtimes	Citations				
		Declaration of Biological Deposit				
	Ц	Computer Readable Form of Sequence Listing				
	Ц	Declaration Under 37 CFR 1.821(f)				
	\bowtie	Application Data Sheet				
		Other:				
3.	Declar					
	×	Enclosed and executed by all inventor(s)				
	Not enclosed or not executed by all inventor(s)					
4.	Assign					
	An ass	signment of the invention to:				
	Wy	eth				
		e Giralda Farms				
	Mad	dison, NJ 07940				
CERTIFICATE OF MAILING 37 CFR §1.10						
date w	vritten belov	hat this paper and the documents referred to as enclosed therein are being deposited with the United States Postal Service on the win an envelope as "Express Mail Post Office to Addressee" Mailing Label Number EV 100603233 US addressed to the Mail ication, Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450.				
	Aux	just 24, 2003 Civilia Shessell				
	Date	Cecilia Chessell				

Docket No: AM 101193

Patent

	was made in the prior application and recorded in PTO on	, Reel	,
\boxtimes	Frame is attached under separate Recordation Form Cover Sheet. will follow.		

5. Filing Fee Calculation

	CLA	AIMS FE	EE			
(1)	(2) (3)			(4)		
FOR	NUMBER NUMBER EXTRA x FOR FILED RATE				BASIC FEE	
						\$750.00
TOTAL CLAIMS	22	2	х	\$	18.00	36.00
INDEPENDENT CLAIMS	7	4	х	\$	84.00	336.00
MULTIPLE DEPENDENCY FEE	3			\$	280.00	280.00
		Total Filing Fee:			\$1,402.00	

6. Method of Payment of Fees:

Charge Deposit Account No. 01-1425 in the amount of \$1,402.00.

A duplicate of this transmittal is attached.

7. Instructions as to Overpayment:

Credit any overpayment to Deposit Account No. 01-1425.

8. General Authorization:

During the pendency of this application treat any reply requiring a petition for extension of time for its timely submission as containing a request therefor for the appropriate length of time. The Commissioner is hereby authorized to charge all required extension of time fees during the entire pendency of this application to Deposit Account No. 01-1425.

9. Authorization to Charge Additional Fees

- The Commissioner is hereby authorized to charge the following additional fees by this paper and during the entire pendency of this application to Deposit Account No. 01-1425
- 37 CFR 1.16(a), (f), or (g) filing fees
- 37 CFR 1.16(b), (c), and (d) presentation of extra claims
- 37 CFR 1.16(e) surcharge for filing the basic filing fee and/or declaration on a date later than the filing date of the application.

Docket No: AM 101193 Patent

10.	Relate back (35 USC 119(e)) Amend the Specification by inserting before the first line the sentence:			
	—This application claims priority from copending provisional application(s) application number 60/ filed on .—			
11.	REQUEST AND CERTIFICATION UNDER 35 U.S.C 122(b)(2)(B)(i). A request not to publish this application and certification under 35 U.S.C. 122(b)(2)(B)(i) is attached.			
12.	2. Correspondence Address and Telephone Number			
	SEND CORRESPONDENCE TO: Customer Number: 25291			
DIRECT ALL TELEPHONE CALLS TO: Name: Adley F. Mandel Tel. No. (973) 660-7659				
13.	Return Receipt Postcard is attached.			

Adley F Mandel

Reg. No. 26,942

Wyeth Patent Law Department Five Giralda Farms Madison, NJ 07940 Tel. No. (973) 660-7659